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It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

ATTACHED COPY

APPLICATION NUMBER: 61/53445

Total Fee Calculation

Fee Code	Total # Claims	Number Estd.	X	Fee	Fee	Total
Small				\$10.00	\$10.00	
Basic Filing Fee	<u>100.00</u>					<u>100.00</u>
Total Claims > 20	<u>100.00</u>	<u>50</u>	<u>x</u>			<u>100.00</u>
Independent Claims > 3	<u>100.00</u>	<u>6</u>	<u>x</u>			<u>60.00</u>
Multi-Dep. Claim Present	<u>100.00</u>					
Surcharge	<u>100.00</u>					<u>100.00</u>
English Translation	<u>100.00</u>					

TOTAL FEE CALCULATION

Fees due upon filing the application

Total Filing Fees Due = \$ 260.00

Less Filing Fees Submitted = \$ 0.00

ANCE DUE = \$ 260.00

100.00
for Patent Examination

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

09511913

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	50 minus 20 = * 30	
INDEPENDENT CLAIMS	6 minus 3 = * 3	
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY
TYPE

OR OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
	345.00	OR	690.00
X\$ 9=		OR	X\$18= 540
X39=		OR	X78= 271
+130=		OR	+260=
TOTAL		OR	TOTAL 1461

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	
					Total	Minus
			**	=	Independent	Minus

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	
					Total	Minus
			**	=	Independent	Minus

ADDITIONAL
FEE

ADDITIONAL
FEE

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	
					Total	Minus
			**	=	Independent	Minus

ADDITIONAL
FEE

ADDITIONAL
FEE

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.